



# END STAGE RENAL DISEASE NETWORK OF TEXAS

Population Health Innovation Pilot Project

# Vaccination Discussion Groups

## Facilitator's Guide



### Included:

- Overview
- Suggested Agenda and Required Questions
- Documentation
- Timeline

## **Overview: Recruiting Patients and Structuring your Discussion Groups**

**Recruiting Patients:** Invite patients prior to meetings

- Tips for recruiting patients:
  - Post flyers—see toolkit
  - Personal invitations from staff
  - Referral from Facility Patient Representative (FPR)

**Group size:** 3 to 5 patients

**Patient Co-facilitator:** Each group should have a Black/African -American (AA) co-facilitator.

**Number of Groups:** Depends on your AA patient population

**Language:** See the Recommendations section

**Time:** Before treatment or on non-treatment day

**Length:** Approximately 45 minutes

**Location:** Private room at the clinic or a nearby restaurant or church; NOT on the clinic floor

**Food:** Provide light refreshments

**Incentives:** Phone card or retail gift card of nominal value suggested

**Record Keeping:** Audio recording is a best practice

**Sign-in Sheet:** Signatures from all participants

**Documentation for Network:** Discussion Group Summary Form

## Recommendations for Structuring your Discussion Groups

**Group size:** Keep them small so that everyone has a chance to be heard. Three to five patients is ideal.

**Number of Groups:** If you have less than 30 AA patients, one group may be enough. If your AA patient population is large, more than one group will be necessary to achieve a representative sample of your patients' ideas about the topic. We suggest that facilities with 30 or more AA patients hold at least two groups. Use an AA co-facilitator in each meeting.

**Language:** If your unit has a population of Spanish-speaking AA patients, the Network encourages you offer/hold at least one meeting in Spanish for those who prefer to communicate in that language. Spanish language materials will be available upon request.

**Time:** Before treatment or on a non-treatment day may be the best time to engage patients.

**Length:** Approximately 45 minutes

**Location:** Meet in a private room at the clinic or a nearby restaurant or church; do NOT meet on the clinic floor. We recommend an atmosphere where your patients will feel free to share health information and express their opinions without concern for others overhearing.

**Food:** We recommend light refreshments to entice your patients to participate.

**Incentives:** We also recommend, if possible, offering small incentives of nominal value to encourage participation.

**Record Keeping:** To allow you to facilitate the discussion, we recommend a method of note-taking that won't distract you from the discussion. Audio recording is a best practice and allows you to replay the conversation(s) and summarize the important parts. If this is not a viable option for your group(s), we recommend asking another staff member to participate solely as a note-taker so that your concentration isn't split between two tasks.

**Sign-in Sheet:** Signatures from all participants are required.

**Documentation for Network:** The Discussion Group Summary Form that you will turn in to the Network will allow us to understand how your patients perceive vaccinations and any barriers that keep them from getting vaccinated. This will allow us to better understand the issue as we spread vaccination awareness across the state of Texas.



## Suggested Agenda and Required Questions

### 1. Welcome and Introductions

- A. Welcome and thank your patients for taking the time to participate in the discussion. Introduce yourself and any other staff members that may be helping you. Have your patients introduce themselves.
- B. Restate the purpose of the group so that your patients understand the vital information they hold can be useful to our mutual goals:
  - “Due to the rapidly growing number of AA dialysis patients in Texas, who make up 28% of the entire dialysis population in the state, we are participating in a project to understand cultural views about vaccinations. We would like to understand why an AA person would or would not choose to be vaccinated.”
- C. Establish ground rules so that your patients will feel comfortable expressing their personal opinions. For example:
  - “Let’s respect one another’s opinions.”
  - “There are no stupid questions or wrong answers.”

### 2. Exploratory Questions—Find out what your patients know and/or think about vaccinations

#### Ask what members of the group think about vaccinations:

1. Do you think that immunization and vaccination is the same thing?
2. I would like to understand what you think about vaccinations.
  - What do you think the Hepatitis B vaccination does?
  - What do you think the Pneumonia (*or what you would normally call the pneumococcal*) vaccination does?
3. (*Optional question; use your judgment*) Have you been vaccinated for:
  - Hepatitis B? (*Have the note-taker keep a tally of those who have*)
  - Pneumonia? (*Have the note-taker keep a tally of those who have*)
4. What are some myths or stories you have heard about vaccines that you later learned were wrong?

#### Explain that most children are required to be vaccinated for Hep B to attend school

5. Do you know any children that were vaccinated to attend school?
6. Did your children or grandchildren have any problems after getting the vaccines?

*Remember that these questions are to help you understand how your AA patients perceive vaccinations. Be sure to recognize that their beliefs may not reflect scientific or medical “fact,” but that these views should be given respectful and courteous consideration.*

## Vaccination Discussion Groups—Facilitator’s Guide

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## Suggested Agenda and Required Questions

### **3. Discussion Questions—Discover barriers to patient vaccination and find out your patients' learning styles**

**Discuss the following questions with your group members:**

7. If a patient decides NOT to be vaccinated, what worries would you think they have about getting vaccinated?
8. If a patient HAS been vaccinated, what do you think encouraged him or her (information, friend, TV) to get vaccinated?
9. When you have questions about your health, like getting shots to prevent diseases, what books, websites, or other resources do you find helpful?
10. In your community, who do you trust to give you good advice? For example, who would you go to for advice about making healthcare decisions?
11. Pictures or drawings help some people understand new things. What helps you learn new things?

*Remember that these questions are to help you understand the barriers or opportunities to patient vaccination, as well as to understand how best to teach new and complicated information. The answers to these questions will help you and your staff members design an effective vaccination awareness campaign that will motivate your patients to receive these important vaccinations.*



## Documentation—all items available in the toolkit

### **Attestation Form**

The *Attestation Form* is for the facilitator to verify that he or she has read the *Facilitator's Guide* and understands the content and purpose of the discussion groups. Discussion groups are a mandatory requirement of the PHIPP, in which the facilitator's unit is currently participating. The form must be returned to the Network 14 office by the deadline (see Timeline section).

### **Informed Consent Form**

The *Informed Consent Form* will inform your patients that their thoughts and opinions will help create a vaccination awareness campaign and that the group discussion may be recorded. The form will stress that the recording will not be used outside of the facility or by anyone other than the staff members in the room. By signing the form, your patients agree to participate in the discussion and have their voices recorded. You should invite your patients to the group and have them sign the form before the meeting takes place.

### **Sign-in Sheet**

The *Sign-in Sheet* must be signed by all staff members and patients that attend the group discussion and must document the date, time, and the primary language in which the meeting is held. A sign-in sheet must be completed for each meeting held and returned to the Network 14 office by the deadline (see Timeline section). **DO NOT EMAIL.**

### **Discussion Group Summary Form**

The *Discussion Group Summary Form* should be filled out for each discussion group you hold. It will allow Network 14 to understand the barriers to patient vaccination. The form must be returned to the Network 14 office by the deadline (see Timeline section). Any recordings or notes you take during the meeting will help you complete the summary form and design the awareness campaign, but are not required to be submitted to Network 14. **DO NOT EMAIL.**

## Timeline

Network 14 has posted the Facilitator's Guide and toolkit:  
**Available on the Network 14 website now**

### Attestation Form Deadline

- **July 3, 2015**—Signed Facilitator Attestation form due to the Network 14 office

### Organize and hold Discussion Groups: **July 1-July 24**

- **July 24, 2015**—Sign-in sheets and Discussion Group Summary Forms due to the Network 14 office

### Network 14 will post Vaccination Awareness Campaign Guidelines and Resources: **July 24, 2015**

- **August 7, 2015**—Vaccination Awareness Campaign Plan due to the Network 14 office

### Promote Vaccination through Vaccination Awareness Campaign: **August 10-September 18, 2015**

- August is National Immunization Awareness Month
- **September 18, 2015**—Campaign Report-out form due

### Submit Vaccination Data per Company Policy: **Monthly**

- Submit or verify batch submission of vaccination data into the CROWNWeb system

All items required to be submitted to the Network 14 office can be mailed or faxed to the address and number on the back of this guide, attention Rachelle DuBose Caruthers. If you have any questions, you can reach her at rcaruthers@nw14.esrd.net or 469-916-3800.

**DO NOT EMAIL PATIENT INFORMATION TO THE NETWORK OFFICE.**



## Resources

*The Immunization Project* - [www.immunizeusa.org](http://www.immunizeusa.org)

*LULAC—Latinos Living Healthy (LLH)* - <http://lulac.org/programs/health/>

*Centers for Disease Control and Prevention (CDC)* - <http://www.cdc.gov/vaccines/>

*National Public Health Information Coalition (NPHIC)* - <http://nphic.org/>

*Mission Statement:* To support equitable patient- and family-centered quality dialysis and kidney transplant health care through patient services, education, quality improvement, and information management.

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